



2010

USE STATE LABEL OR PRINT	First Name and Initial ●	Last Name(s) ●	Your Social Security Number ●
	Mailing Address		Spouse's Social Security Number ●
	City, State, and Zip Code		Telephone Number

PART 1 **TAX RETURN INFORMATION** *(Whole Dollars Only)*

1.	Total Income (Form AR1 or NR1, Line 21)	1		00
2.	Net Tax (Form AR2 or NR2, Line 36)	2		00
3.	State Income Tax Withheld (Form AR2 or NR2, Line 37)	3	●	00
4.	Refund (Form AR2 or NR2, Line 45)	4		00
5.	Tax Due (Form AR2 or NR2, Line 49)	5		00

PART 2 DECLARATION OF TAXPAYER

6a. ☐ I consent that my refund be directly deposited as designated in the electronic portion of my 2010 Arkansas income tax return. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.

Routing Number

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☐ Checking ☐ Savings

Account Number

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Direct deposits will not be deposited into accounts outside the United States. To comply with new banking rules, answer the following:

Will this refund go to an account outside the United States? ☐ Yes ☐ No

Call (501) 682-7225 if your response changes in the future.

6b. ☐ I do not want direct deposit of my refund or I am not receiving a refund.

If I have filed a balance due return, I understand that if the state of Arkansas does not receive full and timely payment of my tax liability, I will remain liable for the tax liability and all applicable interest and penalties. If I have filed a joint federal and state return and my federal return is rejected, I understand my state return will be rejected also.

Under the penalties of perjury, I declare that the information I have given my ERO and the amounts in Part I above agree with the amounts on the corresponding lines of the electronic portion of my 2010 Arkansas income tax return. To the best of my knowledge and belief, my return is true, correct, and complete. I consent to my ERO sending my return, this declaration, and accompanying schedules and statements to the State of Arkansas. I also consent to the State of Arkansas sending my ERO and/or transmitter an acknowledgement of receipt of transmission and an indication of whether or not my return is accepted, and if rejected, the reason(s) for the rejection. If the processing of my return or refund is delayed, I authorize the State of Arkansas to disclose to my ERO and/or transmitter the reason(s) for the delay, or when the refund was sent.

Sign

Here

Your Signature _____ Date _____

Spouse's Signature _____ Date _____

PART 3 **DECLARATION OF ELECTRONIC RETURN ORIGINATOR (ERO) AND PAID PREPARER**

I declare that I have reviewed the above taxpayer's return and that the entries on Form AR8453 are complete and correct to the best of my knowledge. If I am only a collector, I understand that I am not responsible for reviewing the taxpayer's return; I declare that Form AR8453 accurately reflects the data on the return. I have obtained the taxpayer's signature on Form AR8453 before submitting this return to the State of Arkansas, and have provided the taxpayer with a copy of all forms and information to be filed with the State of Arkansas. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above taxpayer's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct and complete. This declaration of Paid Preparer is based on all information of which the preparer has knowledge.

**ERO'S
Use
Only**

ERO'S Signature _____ Date _____ Check if paid preparer ☐ Check if self-employed ☐ Your SSN or PTIN _____

Firm's name and address _____ FEIN _____

Under penalties of perjury, I declare that I have examined the above taxpayer's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct and complete. This declaration is based on all information of which I have any knowledge.

**Paid
Preparer's
Use Only**

Preparer's Signature _____ Date _____ Check if self-employed ☐ Preparer's SSN or PTIN _____
 Firm's name and address _____ FEIN _____

DO NOT MAIL THIS FORM

Special Information

Direct Deposit will be offered on electronically filed Arkansas Individual Income Tax returns. This is restricted to taxpayers who will receive a Federal refund and are using the Direct Deposit method for their Federal refund. You must use the same account that is being used for the direct deposit of your Federal refund. Direct deposits will not be deposited into accounts outside the United States.

Effective January 1, 2000, EROs are **required** to retain the AR8453 forms along with the original W-2, W-2G and 1099-R forms and other special forms for 3 years from the original due date of the tax return except when form AR1000RC5 must be submitted to the State of Arkansas.

If the taxpayer is claiming the Developmentally Disabled Credit, the AR1000RC5 or renewal letter and a copy of Form AR8453 should be mailed or faxed to the E-File Office immediately after the Federal acknowledgment is received. EROs should retain the original Form AR8453 with the W-2, W-2G and 1099-R forms and other special forms. See Publication AR1345.

When And Where To File

Only the Austin Service Center will accept electronically filed returns beginning January 14, 2011. For addresses and complete instructions, refer to Federal Publication 1345, Handbook for Electronic Filers of Individual Income Tax Returns, and the Arkansas Handbook, AR1345 for Electronic Filers.

Line Instructions

Name, Address, and Social Security Number:

If the taxpayer received a mailing label from the State of Arkansas, place the label in the name area. If the information on the label is incorrect or the taxpayer did not receive a mailing label, print or type the information in the spaces provided. Verify that the social security number (SSN) is clear and correct. An incorrect or missing SSN may delay any refund. If filing a joint return, be sure the names and SSNs are listed in the same order.

P. O. Box:

If the Post Office does not deliver mail to the taxpayer's home and he/she has a P. O. Box, enter the box number instead of the home address.

Note: *The address must match the address shown on the electronically filed Form AR1000F.*

Part I – Tax Return Information

Line 3. Enter the total State of Arkansas withholding from Form(s) W-2 and/or 1099.

Part II – Declaration of Taxpayer

The taxpayer's signature allows the State of Arkansas to disclose to the ERO and/or the transmitter the reason(s) for delays in the processing of the return.

If the ERO makes changes to the electronic return after Form AR8453 has been signed by the taxpayer but before it is transmitted, the ERO must have the taxpayer complete and sign a corrected Form AR8453 if either of the following apply:

- 1) The total income on line 1 differs from the amount on the electronic return by more than \$25, or
- 2) The total tax on Line 2, the refund on Line 4, or tax due on Line 5 differs from the amount on the electronic return by more than \$7.

Part III – Declaration of Electronic Return Originator (ERO) and Paid Preparer

The State of Arkansas requires the EROs signature.

A paid preparer must sign Form AR8453 in the space for **Paid Preparer's Use Only**. Only handwritten signatures are acceptable. If the paid preparer is also the ERO, he/she should not complete the paid preparer's section. Instead, the box labeled "Check if paid preparer" should be checked.

Refunds: After the State of Arkansas has accepted your electronically filed return, the refund should be issued within 7 to 10 business days.